

Exhibit B

7177 808 ROSS INC.

PERIOD END DATE	PAY RATE	PAY CODE	HOURS		EARNINGS		GROSS	FICA	TAXES			NET PAY
			REG	OT	REG	OT			GENERAL	STATE	LOCAL	
515	LOAD	YTD					1780000	127320	8900	63076		272463
612	LOAD	YTD					900000	64400	26700	27000		272463
					400000		400000	28600	66937	12000		544926
					400000		400000	28600	66937	12000		
					800000		1700000	121600	100574	51000		
												544926
		YTD			800000		2580000	184520	502774	87076		

EMPLOYEE NUMBER	DEPT. NUMBER	SOCIAL SECURITY NUMBER	SALARY	RATE 1	RATE 2	OTHER EARNINGS			O.T. F.T.R.	FED EX	ST	CTY CD	CITY CD
						TY	AMOUNT	CD					
11-0	0100		4000.00			1	2	3					
ROSS, ROBERT N			ACCOUNT NUMBER										
			47304										
7177													
EMPLOYEE EARNINGS RECORD			LOCAL TAX %										
			DATE LAST RAISE										
			PREV RATE										
			PRYCEX										
			PERIOD END										
			9/30/86										

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BR10000271

CONTINUATION SHEET FOR REPORTING TO STATE

3113353 BOB ROSS INC. 295 SUNSET PARK DRIVE HERNDON VA 22070		Date Quarter Ended DEC 31, 1986	Page Number 1 OF 1	Name of State VIRGINIA
Employer's identification number, name and address 7177		GRAND TOTALS ALL WAGE REPORT SHEETS ENTER ON PAGE 1 ONLY TAXABLE WAGES 7753.00 TOTAL WAGES 60806.26		
EMPLOYEE'S SOCIAL SECURITY NUMBER	NAME OF EMPLOYEE	STATE TAXABLE WAGES *	TOTAL WAGES *	
[REDACTED]	ROSS, JANE L		439200	
[REDACTED]	KOWALSKI, WALTER J		1200000	
[REDACTED]	[REDACTED]		1200000	
[REDACTED]	[REDACTED]	165300	165300	
[REDACTED]	[REDACTED]	14988	14988	
[REDACTED]	[REDACTED]	279300	279300	
[REDACTED]	[REDACTED]	83325	83325	
[REDACTED]	KOWALSKI, ANNETTE H		1200000	
[REDACTED]	[REDACTED]	139437	205563	
[REDACTED]	[REDACTED]		1200000	
[REDACTED]	[REDACTED]	8400	8400	
[REDACTED]	[REDACTED]	84450	84450	
TOTALS FOR THIS PAGE number of employees and wage totals		12 7753.00 60806.26		

* EMPLOYER: Only use columns applicable to state requirements.

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CLIENT NO. 7177 HOB PERS INC.

QUARTERLY REPORT FOR QUARTER ENDING 12/31/86 PAGE NBR 1

1/01/87

EMPLOYEE INFORMATION --YTD/QTD-- --YTD EARNINGS--

---TAXABLE--- ---EXCESS--- ---EXEMPT---

1-0 VA-R 4546 VA	506.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP		
2-0 VA-R 4546 VA	506.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP		
3-0 VA-R 4546 VA	7661.26 2055.63	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	2055.63 1394.37 1394.37	661.26 661.26
4-0 VA-R 4546 VA	1955.25	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP		
5-0 VA-R 4546 VA	44000.00 12000.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	10000.00 2000.00 12000.00 12000.00	
6-0 VA-R 4546 VA	44000.00 12000.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	10000.00 2000.00 12000.00 12000.00	
7-0 VA-R 4546 VA	44000.00 12000.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	10000.00 2000.00 12000.00 12000.00	
8-0 VA-R 4546 VA	49800.00 12000.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	4200.00 7800.00 12000.00 12000.00	

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CONTINUATION SHEET FOR REPORTING TO STATE

3113353 BOB ROSS INC. 295 SUNSET PARK DRIVE HERNDON VA 22070		Data Quarter Ended MARCH 31 1987	Page Number 1 OF 1	Name of State VIRGINIA
Employee's Identification number, name and address		GRAND TOTALS ALL WAGE REPORT SHEETS TAXABLE WAGES 48586.94 TOTAL WAGES 68586.94 EXCESS WAGE 20000.		
EMPLOYEE'S SOCIAL SECURITY NUMBER	NAME OF EMPLOYEE	STATE TAXABLE WAGES •		
		TOTAL WAGES •		
		129870	129870	
		96450	96450	
		217770	217770	
		700000	1200000	
		68750	68750	
		700000	1200000	
		207478	207478	
		39600	39600	
		76200	76200	
		289350	289350	
		79200	79200	
		121475	121475	
		700000	1200000	
		280027	280027	
		700000	1200000	
		112250	112250	
		91500	91500	
		79788	79788	
		56000	56000	
		112788	112788	
LE FOR THIS PAGE ber of employees wage totals		48586.94 68586.94		

• EMPLOYER: Only use columns applicable to state requirements

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[illegible]

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CLIENT NBR 7177 BOB ROSS INC.

QUARTERLY REPORT FOR QUARTER ENDING 6/30/87 PAGE NBR 1 6/26/87


EMPLOYEE INFORMATION --YTD/OTD-- --OTD EARNINGS--

---TAXABLE--- ---EXCESS--- ---EXEMPT---

3-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	2800.27	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP		
5-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	687.50	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP		
KOVALSKI, WALTER J 8-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	27800.00 15800.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	15800.00	15800.00 15800.00
KOVALSKI, ANNETTE H 9-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	27800.00 15800.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	15800.00	15800.00 15800.00
ROSS, JANE L 10-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	27800.00 15800.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	15800.00	15800.00 15800.00
ROSS, ROBERT N 11-0 [REDACTED] IN-R [REDACTED] VA [REDACTED]	27800.00 15800.00	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	15800.00	15800.00 15800.00
12-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	2177.70	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP		
14-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	2037.90 910.02	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	910.02 910.02	910.02 910.02
15-0 [REDACTED] VA-R [REDACTED] VA [REDACTED]	3028.65 953.89	TIPS MEALS SICK ANNUITY	FICA WAGES FICA TIPS STATE UNEMP FED UNEMP	953.89 953.89	953.89 953.89
CURTIS, JANET S.	5704.60	TIPS	FICA WAGES		

BR10000276

WORKSHEET FOR REPORTING TO STATE

Date Quarter Ended JUNE 30, 1987		Page Number 1 OF 1		Name of State VIRGINIA	
ENTER ON PAGE 1 ONLY		GRAND TOTALS ALL WAGE REPORT SHEETS TAXABLE WAGES 19403.32		TOTAL WAGES 82603.32	
EMPLOYER'S NAME AND ADDRESS DRIVE 22070		NAME OF EMPLOYEE		STATE TAXABLE WAGES *	TOTAL WAGES *
		ROSS, JANE L.		70951	70951
		KOWALSKI, WALTER J		136200	136200
					1580000
				95389	95389
				245276	245276
				87750	87750
				289900	289900
				265113	265113
		KOWALSKI, ANNETTE H		89850	89850
		ROSS, ROBERT N			1580000
			1580000		
			107625	107625	
			118800	118800	
			230751	230751	
			102375	102375	
			91002	91002	
			9350	9350	
TOTALS FOR THIS PAGE Number of employees 18 Wage totals				1940332	8260332

* EMPLOYER: Only use columns applicable to state requirements.

1. Control number		Copy 1 For State, City, or Local Tax Department OMB No. 1545-0008				Employee's and employer's copy compared <input type="checkbox"/>			
2. Employer's name, address, and ZIP code BOB ROSS INC. 1906 C SQUIRE CT STERLING VA 22170						3. Employer's identification number [REDACTED]		4. Employer's state ID, number	
5. Statutory employee <input type="checkbox"/> Deceased <input type="checkbox"/> Pension plan <input type="checkbox"/> Legal rep. <input type="checkbox"/>						942 <input type="checkbox"/> Subtotal <input type="checkbox"/> Deferred compensation <input type="checkbox"/> Void <input type="checkbox"/>			
6. Allocated tips						7. Advance EIC payment			
8. Employee's social security number [REDACTED]		9. Federal income tax withheld 23413.11		10. Wages, tips, other compensation 85999.98		11. Social security tax withheld 3379.50			
12. Employee's name, (first, middle, last) ROBERT N ROSS [REDACTED]						13. Social security wages 45000.00		14. Social security tips	
15. [REDACTED]						16. [REDACTED]		16a. Fringe benefits incl. in Box 10	
2708.65						85999.98		FL	
Form W-2 Wage and Tax Statement 1988						State/local income tax		State/local wages, tips, etc.	
						Name of state/locality			

PAYROLLS BY PATCHEX

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PAYROLLS BY PAYCHEX.

777 BOB ROSS INC

EMPLOYEE EARNINGS RECORD

PERIOD END DATE 12/31/88

PERIOD END DATE	PAY RATE	PAY CODE	HOURS REG.	O.T.	EARNINGS REG.	O.T.	GROSS	F.I.C.A.	FEDERAL	STATE	LOCAL	DBL	MED INS	F.I.C.A. ADJ	1	2	3	4	DEDUCTIONS	7	8	9	10	NET PAY
12/31					800000		800000	60030	223425	27200														489295
12/31					800000		800000	45080	158654	20400														375886
12/31	REG	VCH			800000		800000	60080	223425	27200														489295
12/31	ONS	VCH			800000		800000	45080	158654	20400														375886
12/31					800000		800000	60080	223425	27200														489295
12/31					800000		800000	60080	223425	27200														489295
12/31					800000		800000	60080	223425	27200														489295
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12/31					800000		800000	60080	223425	27200														489295
12/31					800000		800000	60080	223425	27200														489295
12/31				</																				

1 Control number		Copy 1 For State, City, or Local Tax Department OMB No. 1545-0008		Employee's and employer's copy compared <input type="checkbox"/>	
2 Employer's name, address, and ZIP code BOB ROSS INC. 1306 C SQUIRE CT STERLING, VA 22170				3 Employer's identification number [REDACTED]	4 Employer's state ID, number
5 Statutory employee	6 Deceased	7 Pension plan	8 Legal rep.	9 942 emp.	10 Subtotal
					11 Deferred compensation
8 Allocated tips				7 Advance EIC payment	
10 Wages, tips, other compensation 84999.96				11 Social security tax withheld 3604.80	
13 Social security wages 48000.00				14 Social security tips	
15				16a Fringe benefits incl. in Box 10	
16b				16c	
17				18	
19				20	
21				22	
23				24	
25				26	
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Form W-2 Wage and Tax Statement 1989

PATROLLS BY PATCHEX

1 Control number

Copy 1 For State, City, or Local Tax Department

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PAYROLLS BY PAYCHEX

7177 BOB ROSS INC

EMPLOYEE EARNINGS RECORD

PERIOD END DATE 6/30/50

PERIOD END DATE	PAY RATE	PAY CODE	HOURS		EARNINGS		TAXES		1	2	3	4	5	6	7	8	9	10	NET PAY
REG.	OT	REG.	OT	WAGES	FICA	FEDERAL	STATE	LOCAL	DEL	MED	INS	FICA	ADJ	ADV					
125				633333		633333	48450	134246											450637
122				633333		633333	48450	134246											450637
122				633333		633333	48450	134246											450637
122				633333		633333	48450	134246											450637
	ON			1000000		1000000	76500	287250											587500
	QTD			689999		689999								48750					1939411
				1000000		1000000													
				289999		289999	221850	689999											
														48750					
	YCH			72500		72500	5850	20300						46250					
				633333		633333	48450	134246											450637
				633333		633333	48450	134246											450637
				633333		633333	48450	134246											450637
	QTD			689999		689999	197249	423078											1351811
				72500		72500	151300							46250					
	YTD			3072500		3072500	487249	1113026						95000					3291322
							373150												

Case 1:17-cv-01077-LO-TCB Document 56-5 Filed 07/20/18 Page 12 of 30 PageID# 523

BR0000281

EMPLOYEE EARNINGS RECORD
PERIOD END DATE 9730798

BR10000282

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BR10000283

BR10000284

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EMPLOYEE EARNINGS RECORD
PERIOD END DATE 6/30/91

Case 1:17-cv-01077-LO-TCB Document 56-5 Filed 07/20/18 Page 16 of 30 PageID# 527

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PAYROLLS BY PAYCHEX.
7177 808 ROSS INC.EMPLOYEE EARNINGS RECORD
PERIOD END DATE 09/30/91

PERIOD END DATE	PAY RATE	HOURS	EARNINGS	WITH-HOLDINGS	ADJUSTMENTS	7	8	9	10	NET PAY						
REG	OT	WAGES	FEDERAL	STATE	LOCAL	DBL	FICA TNS.	FICA ADJ	FICA DED	ADJ ADV	ADJ PLAN					
QTD		1899999	181400													1210449
QTD		1899999	181400													1204649
QTD		1899999	181400													1224080
YTD		5699997	1647100													363978

EMPLOYEE	TELEPHONE	DATE	TIME	TYPE	AMOUNT	BALANCE	MAXIMUM	PERCENT	ACCOUNT NUMBER	TRAN
ROSS ROBERT N		02/06/85	02/06/85	FICA DED						
		02/06/85	02/06/85	FICA DED						
		02/06/85	02/06/85	FICA DED						

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BR10000286

EMPLOYEE EARNINGS RECORD

7177 BOB ROSS INC.

PERIOD END DATE 12/31/91

[illegible]

BR10000287

Case 1:17-cv-01077-LO-TCB Document 56-5 Filed 07/20/18 Page 19 of 30 PageID# 530

State/local income tax 4884.00	State/local wages, tips, etc. 81858.78	State/locality name VA	State/local income tax 1183.88	State/local wages, tips, etc.	State/locality name
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Form W-2 Wage and Tax Statement 1991

Copy D For EMPLOYEE

1 Control number		Dept. of the Treasury - Internal Revenue Service OMB No 1545-0048		3 Employer's identification number	4 Employer's state I.D. number	5 Employee's social security number
2 Employer's name, address, and ZIP code BOB ROSS INC. 1306 C SQUIRE CT STERLING, VA 22170		7177		19 Employee's name, address, and ZIP code ROBERT N ROSS [REDACTED] 32810		17 See instructions for Form W-2
6 Statutory employee		7 Allocated tips		8 Advanced EIC payment		11 Other
9 Federal income tax withheld 26720.00		10 Wages, tips, other compensation 87999.96		11 Social security tax withheld 3310.80		12 Social security wages 53400.00
13 Social security tips		14 Medicare wages and tips 87999.96		15 Medicare tax withheld 1275.88		16 Nonqualified plans
State/local income tax		State/local wages, tips, etc.		State/locality name		State/local income tax
State/local wages, tips, etc.		State/locality name		State/local income tax		State/local wages, tips, etc.
State/locality name		State/local income tax		State/local wages, tips, etc.		State/locality name

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BRI0000288

PAYROLLS BY PAYCHEX
7177 BOB ROSS INC.

EMPLOYEE EARNINGS RECORD
PERIOD END DATE 03/31/92

PERIOD END DATE		PAY RATE	HOURS		EARNINGS		WITHHOLDINGS										ADJUSTMENTS										7	8	9	10	NET PAY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
REG		OT	REG	OT			WAGES	SSOCC DED MIL-AN	FEDERAL	STATE	LOCAL	DR	MED- INS.	FICA ADD	MISC DED	ADV	CAF PLAN																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														

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EMPLOYEE EARNINGS RECORD

PERIOD END DATE 06/30/92

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PAYROLLS BY PAYCHEX.
 7177 BOB ROSS INC.

EMPLOYEE EARNINGS RECORD
 PERIOD END DATE 09/30/92

PERIOD END DATE	PAY RATE	PAY CODE	HOURS	REG	OT	EARNINGS	WAGES	SOC SEC REV/AMT	FEDERAL	STATE	LOCAL	DBL	MED INS.	FICA ADJ	MISC DED	ADV	ADJUSTMENTS	7	8	9	10	NET PAY
09/30/92	180						833333	48450	185400													389483
							833333	48450	185400													389483
		OTC					1266666	96900	390800													778966
							833333	48450	185400													389483
							833333	48450	185400													389483
		OTC					1899999	145350	506200													1248449
							833333	48450	185400													389483
							833333	48450	185400													389483
		OTC					1899999	145350	466200													1288449
							833333	48450	185400													389483
							833333	48450	185400													389483
		OTC					1899999	145350	1363200													3315864
		WTD					5066664	387600														

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PAYROLLS BY PAYCHEX.

7177 808 ROSS INC.

EMPLOYEE EARNINGS RECORD

PERIOD END DATE 12/31/92

PERIOD END DATE	PAY RATE	PAY CODE	HOURS	EARNINGS	WITHHOLDINGS	1	2	3	4	5	6	7	8	9	10	NET PAY
REG	OT	REG	OT													
6333333						6333333	48450	195400								389483
6333333						6333333	48450	195400								389483
1266666						1266666	96900	390600								778966
6333333						6333333	48450	195400								389483
6333333						6333333	48450	195400								389483
1899999						1899999	145350	506200								1248449
6333333						6333333	48450	195400								389483
6333333						6333333	48450	195400								389483
1899999						1899999	145350	466200								1288449
6333333						6333333	39142	155400								430786
6333333						6333333	39142	155400								430786
6000000						6000000	87000	1860000								4053000
1899999						1899999	144513	2326200								5429286
6966663						12966663	532112	3689400								8745150

EMPL #	TERM	DEPT #	SOCIAL SECURITY NIN	SALARY	RATES	BIRTH DATE	NO	ADJUSTMENT NAME	AMOUNT	BALANCE	MAXIMUM	R & T	ACCOUNT NUMBER	TRAN
0011		000100		6333.33		02/06/85		MED. INS.						
				40.00		02/03/89		MISC. ADV. CAFE GARN						
								INS. DEF. PLAN						

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Form W-2 Wage and Tax Statement 1992

01/08/8

Copy D For EMP

1 Control number	2 Dept. of the Treasury - Internal Revenue Service OMB No. 1545-0045	3 Employer's identification number	4 Employer's state I.D. number	5 Employee's social security number
2 Employer's name, address, and ZIP code	7177	19 Employee's name, address, and ZIP code	0011-000100	17 See instructions for Form W-2
BOB ROSS INC. 1306 C SQUIRE CT STERLING, VA	22170	ROBERT N ROSS	32810	
6 Statutory employee	7 Allocation	8 Advanced EIC payment	9 Federal income tax withheld	10 Wages, tips, other compensation
			38884.00	128888.63
13 Social security tips	14 Medicare wages and tips	15 Medicare tax withheld	16 Social security wages	17 Nonqualified plans
	128888.63	1880.13	55500.00	
State/local income tax	State/local wages, tips, etc.	State/local income tax	State/local wages, tips, etc.	State/locality

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BRI0000293

Form W-2 Wage and Tax Statement 1993

a Control number 0031-7177 0011-000100		b Department of the Treasury - Internal Revenue Service OMB No. 1545-0048	
c Employer's name, address, and ZIP code BOB ROSS INC. 4208-A TECHNOLOGY COURT CHANTILLY VA 22021		1 Wages, tips, other compensation 105612.36	2 Federal income tax withheld 27526.75
d Employee's name, address, and ZIP code ROBERT N ROSS [REDACTED]		3 Social security wages 57600.00	4 Social security tax withheld 3571.20
e Employee's case, address, and ZIP code [REDACTED]		5 Medicare wages and tips 105612.36	6 Medicare tax withheld 1531.36
f State		7 Social security tips	8 Allocated tips
g Employer's state I.D. No.		9 Advance EIC payment	10 Dependent care benefits
h State wages, tips, etc.		11 Nonqualified plans	12 Benefits included in Box 1
i State income tax		13 Local wages, tips, etc.	
j Locality name		14 Local income tax	

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EMPLOYEE EARNINGS RECORD
PERIOD END DATE 12/31/93

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PAYROLLS BY PAYCHEX
7177 BOB ROSS INC.

EMPLOYEE EARNINGS RECORD
PERIOD END DATE 12/31/94

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Form W-2 Wage and Tax Statement 1994

EMPLOYER REFERENCE COPY - DO NOT FILE.

Employer's name, address, and ZIP code BOB ROSS INC. 4206-A TECHNOLOGY COURT CHANTILLY VA 22021		1 Wages, tips, other compensation 95162.52		2 Federal income tax withheld 30411.52	
3 Social security wages 60600.00		4 Social security tax withheld 3757.20		5 Medicare wages and tips 95162.52	
6 Medicare tax withheld 1379.88		7 Social security tips		8 Allocation tip	
9 Advance EI payment		10 Dependent care benefit		11 Nonqualified plans	
12 Health (includes in 6a)		13 State wages, tips, etc.		14 State income tax	
15 Local wages, tips, etc.		16 Local income tax		17 Local wages, tips, etc.	
18 Local income tax		19 Local wages, tips, etc.		20 Local income tax	

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PAYROLLS BY PAYCHEX										EMPLOYEE EARNINGS RECORD														
7177 DCR ROSS INC.										PERIOD END DATE 12/31/95														
HOURS				EARNINGS				TAXES				1 2 3 4 ADJUSTMENTS 7 8 9 10												
PER. END DATE	PAY RATE	C	REG.	O.T.	REG.	O.T.		WAGES	SS MED	FEDERAL	STATE	LOCAL	DBL	MED-INS.	FICA ADJ	MISC DER	ADV	CAFE PLAN	GARN					NET PAY
130					793021			793021	60666	285500														446855
235					793021			793021	60666	285500														446855
329					793021			793021	60666	285500														446855
	QTD				2379063			2379063		856500														1340555
								SS 147501																
								MED 34497																
426					793021			793021	60666	285500														446855
521					793021			793021	60666	285500														446855
621					793021			793021	60666	285500														446855
	QTD				2379063			2379063		656500														1340555
								SS 147501																
								MED 34497																
719					102324			102324	7828	94486														82397
719	YCHRE				102324			102324	7828	94486														82397
719					102324			102324	7828	12099														82397
	QTD				102324			102324		12099														82397
								SS 6344																
								MED 1484																
	YTD				4860450			4860450		1725099														2763527
								SS 601346																
								MED 70478																

EMPL. #	TRIM	DEPT.	SOCIAL SECURITY NO.	SALARY	RATES	BIRTH DATE	NO.	ADJ. NAME	AMOUNT	R & T	ACCOUNT NUMBER	NO.	ADJ. NAME	AMOUNT	R & T	ACCOUNT NUMBER
0911	7/5	000106		7930.21				1	MED. INS.							
								1	FICA ADJ							
								1	MISC DER							
								1	ADV							
								1	CAFE PLAN							
								1	GARN							
ROSS, ROBERT H																
												</				

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Form W-2 Wage and Tax Statement 1995

EMPLOYER REFERENCE COPY - DO NOT FILE.

a Control number 0031-7177 0011-000100		b Employer's name, address, and ZIP code BOB ROSS INC. 4206-A TECHNOLOGY COURT CHANTILLY VA 22021		c Federal income tax withheld 17250.99	
d Employer's name, address, and ZIP code [REDACTED]		e Employer's name, address, and ZIP code [REDACTED]		f Social security wages 48604.50	
g Social security wages 48604.50		h Medicare wages and tips 48604.50		i Social security tax withheld 3013.46	
j Social security tips [REDACTED]		k Medicare tax withheld 704.78		l Associated tips [REDACTED]	
m Advance Ill. payment [REDACTED]		n Dependent care benefits [REDACTED]		o Nonqualified plans [REDACTED]	
p State wages, tips, etc. [REDACTED]		q State income tax [REDACTED]		r Local wages, tips, etc. [REDACTED]	
s Local income tax [REDACTED]		t Local income tax [REDACTED]		u Local income tax [REDACTED]	

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